

Eddie Rosas #25170
Name and Prisoner/Booking Number

Kings County Jail
Place of Confinement

P.O. Box 11699
Mailing Address

Hanford Ca, 93230
City, State, Zip Code

RECEIVED

MAR 07 2022

FILED

MAR 07 2022

CLERK U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
BY [Signature]
DEPUTY CLERK

(Failure to notify the Court of your change of address may result in dismissal of this action.)

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF CALIFORNIA

Eddie Enrique Rosas
(Full Name of Plaintiff) Plaintiff,

v.

(1) Kings County Jail
(Full Name of Defendant)

(2) Deputy Vanessa #5384

(3)

(4)

Defendant(s).

☐ Check if there are additional Defendants and attach page 1-A listing them.

CASE NO. 1:22CV00274 BAR (PL)
(To be supplied by the Clerk)

CIVIL RIGHTS COMPLAINT
BY A PRISONER

- ☐ Original Complaint
☐ First Amended Complaint
☐ Second Amended Complaint

A. JURISDICTION

1. This Court has jurisdiction over this action pursuant to:

☒ 28 U.S.C. § 1343(a); 42 U.S.C. § 1983

☐ 28 U.S.C. § 1331; Bivens v. Six Unknown Federal Narcotics Agents, 403 U.S. 388 (1971).

☒ Other: Kings County

2. Institution/city where violation occurred: Kings County Jail / Hanford ca.

B. DEFENDANTS

1. Name of first Defendant: Deputy Vanessa #5384. The first Defendant is employed as:
ISU Deputy at Kings County Jail
(Position and Title) (Institution)
2. Name of second Defendant: N/A. The second Defendant is employed as:
_____ at _____
(Position and Title) (Institution)
3. Name of third Defendant: N/A. The third Defendant is employed as:
_____ at _____
(Position and Title) (Institution)
4. Name of fourth Defendant: N/A. The fourth Defendant is employed as:
_____ at _____
(Position and Title) (Institution)

If you name more than four Defendants, answer the questions listed above for each additional Defendant on a separate page.

C. PREVIOUS LAWSUITS

1. Have you filed any other lawsuits while you were a prisoner? ☐ Yes ☒ No
2. If yes, how many lawsuits have you filed? N/A. Describe the previous lawsuits:
 - a. First prior lawsuit:
 1. Parties: N/A v. _____
 2. Court and case number: _____
 3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) _____
 - b. Second prior lawsuit:
 1. Parties: N/A v. _____
 2. Court and case number: _____
 3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) _____
 - c. Third prior lawsuit:
 1. Parties: N/A v. _____
 2. Court and case number: _____
 3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) _____

If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.

D. CAUSE OF ACTION**CLAIM I**

1. State the constitutional or other federal civil right that was violated: Sexual harassment

2. **Claim I.** Identify the issue involved. Check **only one**. State additional issues in separate claims.

- ☐ Basic necessities ☐ Mail ☐ Access to the court ☐ Medical care
☐ Disciplinary proceedings ☐ Property ☐ Exercise of religion ☐ Retaliation
☐ Excessive force by an officer ☐ Threat to safety ☒ Other: Sexual Harassment

3. **Supporting Facts.** State as briefly as possible the FACTS supporting Claim I. Describe exactly what **each Defendant** did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments.

On December 29th of 21 Officer Vaness # 6384 pulled me out of my cell and conducted a body search on me Eddie Enriquez Rosas. Officer Vaness patted me down & lingered on my mid section area where he groped my mid section, making me feel very uncomfortable. I reported this sexual harassment to the authorities using their grievance form system with absolutely no results. Kings County Jail staff/officers lie for each other to cover their end, instead of following the law.

4. **Injury.** State how you were injured by the actions or inactions of the Defendant(s).

this action caused me emotional distress, depression, anxiety and flash backs to my child hood.

5. **Administrative Remedies:**

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Claim I? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Claim I to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. NA

CLAIM II

1. State the constitutional or other federal civil right that was violated: N/A

2. **Claim II.** Identify the issue involved. Check **only one**. State additional issues in separate claims.

- | | | | |
|--|---|---|---------------------------------------|
| <input type="checkbox"/> Basic necessities | <input type="checkbox"/> Mail | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Medical care |
| <input type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Property | <input type="checkbox"/> Exercise of religion | <input type="checkbox"/> Retaliation |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Other: <u>N/A</u> | |

3. **Supporting Facts.** State as briefly as possible the FACTS supporting Claim II. Describe exactly what **each Defendant** did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments.

N/A

4. **Injury.** State how you were injured by the actions or inactions of the Defendant(s).

N/A

5. **Administrative Remedies.**

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☐ Yes ☐ No
- b. Did you submit a request for administrative relief on Claim II? ☐ Yes ☐ No
- c. Did you appeal your request for relief on Claim II to the highest level? ☐ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. N/A

CLAIM III

5. **Administrative Remedies.**
- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☐ Yes ☐ No
- b. Did you submit a request for administrative relief on Claim III? ☐ Yes ☐ No
- c. Did you appeal your request for relief on Claim III to the highest level? ☐ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. N/A

If you assert more than three Claims, answer the questions listed above for each additional Claim on a separate page.

E. REQUEST FOR RELIEF

State the relief you are seeking:

I would like for Kings County Jail to have better training as well as better policies that way someone else doesn't have to go through the same thing as well. At least \$100,000

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03-01-22
DATE


SIGNATURE OF PLAINTIFF

N/A
(Name and title of paralegal, legal assistant, or other person who helped prepare this complaint)

N/A
(Signature of attorney, if any)

(Attorney's address & telephone number)

ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If you need more space you may attach more pages, but you are strongly encouraged to limit your complaint to twenty-five pages. If you attach additional pages, be sure to identify which section of the complaint is being continued and number all pages. Remember, there is no need to attach exhibits to your complaint.